Certification Procedure

1. PURPOSE

This procedure aims to define the methods and responsibilities regarding the acceptance of certification applications and implementation of certification in accordance with ISO/IEC 17021-1.

2. DEFINITIONS

Certification Committee: The committee appointed by the Managing Director. It is authorized to take all decisions related to certification by evaluating reports pertaining to organizations that will be certified by Proks.

Audit Team: It is the team assigned to review and evaluate the management system of the organizations according to the relevant standard in relation to the certification activities, selected from the Proks audit officers, and that works in accordance with the Proks working principles, and is formed as being temporary. The number of officials on the audit team can vary depending on the number of staff of the organization, its size, the product, the process variability, and the relevant standard. Where it is deemed necessary, a technical expert related to the sector may be involved in the audit team.

Multi-Site Organization: Locations that are legally linked to the head office of the customer organization, that are included in the management system maintained by the head office, and where they can carry out the corrective action in the direction of the request of the head office are the site, and customer organizations that possess these sites are multi-site customers organizations (IAF MD1). At these sites, the processes need to be the same type as each other or be carried out with similar methods.

3. RELATED DOCUMENTS

FR.01 Certification Application Form
FR.02 Application Review Form
FR.04 Certification Proposal
FR.05 Certification Contract
FR.06 Audit Program
FR.07 Audit Plan
FR.08 Audit Team Information Form
FR.09 Opening/Closing Meeting Form
FR.11 Nonconformity Form
FR.13 Audit Report
FR.14 Review and Decision Form
FR.15 Surveillance Audit Information Form
FR.16 Recertification Audit Information Form
Audit Tracker
LS.05 Customer Document List
PR.03 Audit Procedure
IN.01 Determination of Audit Periods Instruction
IAF MD1
IAF MD5
IAF MD17

4. APPLICATION

4.1. Certification Application

4.1.1. Accepting of Applications

Applications for certification are received either in person with the Certification Application Form or in the electronic environment (via e-mail or the Proks website).

Proks requests from the authorized representative of the client organization that is applying for the necessary information to ensure the below issues:

a) The scope of the desired certification,

b) Detailed information about the client organization that is making the application; name of the organization, site addresses, processes and operations, human and technical resources, functions, relations and related legal obligations,

c) Documents defined in the “Customer Document List”

d) Information on processes performed outside the organization used by the organization that will affect compliance with the requirements,

e) The standards or other requirements that the applicant organization wishes to certify,

f) Whether or not consultation is taken for the management systems for which the certification is requested, and if it is taken, from whom.

4.1.2. Review of Applications

Certification applications are collected by the Operations Manager.

Management systems must be implemented in order for certification applications to be accepted.

The Operations Manager will receive the application of the organization, the information regarding implementation period of the management systems and information regarding the following matters, and composes the Application Review Form

a) That the information about the management system of the customer organization making the application is sufficient to develop a audit program,

b) The removal of any known difference of opinion between Proks and the customer organization making the application,

c) Proks having the competence and ability to carry out certification activities (Such as the EA/NACE code/Category /Technical Field of the organization in the documentation of accreditation certification requests, the capacity of the Auditor and the Technical Expert within the scope of the application being made),

d) The consideration of the scope requested for certification, the time required to perform audits of the sites where the customer organization's operations are performed, and other issues (language, security requirements, threats of impartiality, etc.) affecting the certification activities

The necessary documents and information requested during the application process are requested with the Certification Application Form.

- Trade registration
- Signature authorization document
- Contract for site addresses, if any

At this stage, the audit period (if any) and increases & decreases during the audit period will be stated in the Application Review Form.

The Operations Manager will deliver the Application Review Form to the Certification Manager to review. The Certification

Manager will review the application in accordance with the Application Review Form; and approve the application if it is appropriate, meaning that fulfills the implementation period of management systems and the above-mentioned matters.

During the review stage, the Certification Manager will determine/monitor the Auditors/Technical Experts who will be involved in the decision and audit processes, competent in the applied technical area, in accordance with the Lead Auditor/Auditor/Technical Specialist list.

If there is not any auditor or technical specialist for the EA/NACE Code/Category/Technical Field of the organization, or there is no personnel to be involved in the certification decision at the review stage; the personnel and the required competency will be specified in the Application Review Form and the personnel and required competency will be provided.

It will be checked whether the recommended auditor/technical specialist has a relationship with the applying client organization and the consultancy organization (if any) or not; then they will be assigned accordingly.

In case an accredited organization demands certification for ISO 9001 within the scope of system certification, the application shall not be evaluated and the organization shall be notified in writing.

4.1.3. Making the Proposal

Following the Certification Manager's review and approval of the certification, the Operation Manager will prepare a quote for the client organization, and the quote will be sent to the applicant directly. The Operations Manager manually prepares the quote number by assigning the next sequential number following the quote number.

Upon acceptance of the offer, an ID number is assigned to the customer via Google.

4.1.4. Contracting

After the application for certification has been finalized, the Operation Manager prepares two copies of the Certification Contract.

Both copies of the Certification Contract will be sent to Proks after being signed by the authorized signatory of the client organization.

After the Certification Contracts are signed and returned by the customer organization signature authority, they are signed by the Proks signature authority. A signed copy of the Signed Certification Contract is sent to the organization, and a copy is stored in the organization's files.

4.1.5. Scope Change Application

When a response has been given to the application made for extension of the scope of the certification, Proks conducts a feasibility study to determine whether or not the extension can be made and decides on the audit activities necessary for it.

The scope extension audit is planned and carried out at the organization that accepts the proposal for the scope extension. The scope expansion may, where appropriate, be carried out in conjunction with a surveillance audit.

If the request is a scope reduction, a new certificate is issued without an audit.

4.1.6. Address Change Application

If the organizations have made an application for change of address, if the organization accepting the proposal is a manufacturing organization or if an activity is carried out that has an effect on the service at the related address for the service and there is a possibility of a change in terms of the requirements of the relevant reference standard, the address change audit is planned.

4.2. Programming and Planning of Audits

4.2.1. Creation of the Audit Program

The audit program is created in accordance with the relevant standards for the entire certification cycle that includes audit activities that require the organizations for which certification will take place to demonstrate all requirements of their

management systems.

The audit program includes a two-phase initial audit, Surveillance audit in the first and second years, and recertification audit prior to the last validity date of the certificate in the third year. The three-year certification cycle begins with a decision on initial certification or recertification.

In the first creation of the audit program, in any regulation to be carried out after audits or after changes that occur in relation to the customers, the size of the client organization, the scope and complexity of the management system, products and processes, and along with these, the effectiveness of the management system and the results of previous audits are considered.

The Audit Program is created by the Operation Manager prior to the planning of Stage 1 audits.

The contents of the Audit Program is updated by the Operation Manager in accordance with the information obtained from the audit reports or the audit team after Stage 1, Stage 2, and Surveillance audits. The Audit Program that is created and updated for the first time is sent to the Certification Manager after approval of the Operation Manager.

The Certification Manager approves the Audit Plan after reviewing it and sends it to the Operation Manager for the planning of audits.

4.3. Planning of Audits

Audits to be carried out within the scope of Proks will be carried out by Operation Manager;

- Applications,
- Surveillance and recertification audits and other short-term audits,
- are planned by takıng the EA/NACE code/Category/Technical field
- the states of the Auditor and Technical Experts
- and the request of the Organization

into consideration.

4.3.1. Planning of Initial Certification Audits

ISO 9001 initial certification audits are planned out in two (2) stages, as "Stage 1" and "Stage 2".

In ISO 9001 initial certification audits, it may be decided that all or at least part of Stage 1 audit is carried out at the customer's area. For this aim:

For the ISO 9001 initial certification audits, the Operation Manager identifies the risk group in the direction of IAF MD5, in which the organization is included.

The Stage 1 audit must be carried out at the customer's area for organizations in the "High Risk Group" for ISO 9001.

The Stage 1 audit can also be carried out without going to the customer's site for customers in the "Medium Risk Group" and "Low Complexity Category" for ISO 9001.

The duration of Stage 1 audit is planned to be 1/3 of the total audit time, and the duration of Stage 2 audit is 2/3 of the total audit time.

The time between Stage 1 and Stage 2 audits is planned based on whether the organization is ready for the Stage 2 audit. However, this time should not exceed 6 months. The Stage 1 audit is repeated for longer periods.

In cases where the initial certification audits are to be carried out at the customer's site in (2) two stages, the date and the audit team are first determined for the Stage 1 audit and the concerned organization is generally notified two days before the audit with the Audit Plan prepared by the Operation Manager for it to be confirmed.

When determining the time between the Stage 1 and Stage 2 audits, the needs of the customer in the solving of the

problematic areas identified in Stage 1 audits are taken into account. It monitors the regulations for the Stage 2 audit at Proks.

Following the completion of the Stage 1 audit, the date and the audit team are first determined for the Stage 2 audit and the concerned organization is generally notified (2) two days before the audit with the Audit Plan prepared by the Operation Manager for it to be confirmed.

4.3.2. Planning of Surveillance Audits

Surveillance audits are conducted at least once a year. The first surveillance audit following the ınıtıal certification must take place within the 12 months period following the decision date. If this condition cannot be met, certification wıll be suspended.

Surveillance audits are planned in accordance with the principle set out above by monitoring the organizations.

The surveillance audits after the first surveillance audit are normally planned for a 12 months period. The Surveillance audits are notified by the Operation Manager to the concerned organization with the Surveillance Audit Information Form with the audit date being determined (2) two months before the expiration of the 12 month period so that it is confirmed.

However, in case that the condition regarding the fact that the observation audit must be performed within one year is fulfilled, it will be possible to define an audit date before or after this date if requested by the organization.

The audit team is first determined for the audit date agreed upon and the organization concerned with the Audit Plan prepared by the Operation Manager is generally notified (2) two days before the audit for it to be confirmed.

4.3.3. Planning of recertification Audits

The date of recertification audits is determined based on the certificate validity period.

Recertification audits are planned in accordance with the principle set out above by being monitored.

If a recertification application is received and the certification activities are successfully completed before the period of the current certification is over, the validity period of the recertification will be based on the validity period of the current certification. The issue date of the new certificate is the decision date of the recertification.

If Proks cannot fulfill the audit of recertification within the validity period of the certification or cannot verify that remedial and corrective actions are performed for any major nonconformities, recertification is not recommended and the validity of the certification will not be extended.

In such a case, the client will be informed in writing by the Operations Manager and the actions to be taken afterwards will be explained.

At the end of the certification period;

- If a recertification application is received before the current certification period is over,
- If the audit of the recertification is performed,
- If it cannot be verified that remedial and corrective actions are performed for any major nonconformities,

Proks can withdraw the recertification for 6 months. If the organization wants to complete the recertification before the 6 months period is over, a recertification audit will be performed.

The validity date on the certificate will be the decision date of the certification, and the validity period will be based on the previous certification schedule.

For organizations whose certification validity date is to finish, the concerned organization is notified by the Operation Manager with a Recertification Audit Information Form for the recertification audit date to be determined (4) four months before the end of the certificate validity period.

The audit team is first determined for the date of the audit agreed upon and the organization concerned with the Audit Plan

prepared by the Operation Manager is generally notified (2) two days before the audit for it to be confirmed.

Re-certification audit activities may require a Stage 1 audit when significant changes occur in the management system, at the customer side, or in the conditions under which the management system operates (e.g. changes in legislation).

In such a case, the date for the Stage 1 audit is determined and communicated to the concerned organization by the Operation Manager in order to be confirmed.

The audit team is first determined for the Stage 2 or recertification audit agreed upon and the organization concerned with the Audit Plan prepared by the Operation Manager is generally notified (2) two days before the audit for it to be confirmed.

When determining the time between the Stage 1 and Stage 2 audits, the needs of the customer in the solving of the problematic areas identified in Stage 1 audits are taken into account. It monitors the regulations for the Stage 2 audit at Proks.

4.3.4. Planning of Short-Term Audits

Proks can carry out short-term audits to investigate complaints, respond to changes, or follow-up with suspended customers. In such cases, Proks;

a) Declares the conditions under which the short-term visits will be carried out to the certified customer with the Certification Contract and informs the customer in advance of these visits,

b) Is more cautious in the appointment of the audit team so that the client will not have a chance to appeal to the audit team members.

For scope change audits, a consensus is reached on the issue of it being carried out with an Surveillance audit or with a separate audit. According to the agreed-upon situation, planning is carried out so that an Surveillance audit of the concerned organization or audit of all clauses of the reference standard that may be affected by the scope change.

When it is necessary to conduct an audit in cases of address change, planning is carried out in a way that the audit is carried out at the organization in relation to all the clauses of the reference standard that may be affected by the address change.

Follow-up audits are planned with the written notification that the corrective actions have been completed by the organization being taken into account. If (3) three months have elapsed since the completion of the corrective actions, planning is carried out so that the entire system of the organization will be reevaluated.

In cases where the follow-up audits are not accepted at the determined period for the closing of the corrective actions by the certified/to-be-certified organization, if reasonable and compelling reasons are the point in question, they can be postponed at most by three (3) months and one (1) time with a Certification Manager decision.

The short-term audits are generally notified to the concerned organization (2) two days before the audit for it to be confirmed with the Audit Plan prepared by the Operation Manager.

4.3.5. Determination of Audit Periods

While the period required for the audits to carried out in a full and efficient way is determined in the planning stage of the audits, the following situations are taking into consideration along with the number of employees and audit type and scope:

a) The conditions of the relevant management system standard,

b) The complexity of the customer and their management system,

c) Technological and legislative context,

d) Of all operations in the scope of the management system, those given to sub-contractor,

e) The results of previous audits,

f) The size and number of sites, their geographical location, and multiple site evaluations,

g) Risks related to products, processes or the operations of the customer organization,

h) Whether audits are unified, common, or integrated.

In all audits, the number of person/day audits according to the types of audits and the reductions or increases to be made during the audit days are made in accordance with the Audit Time Determination Instruction.

The duration of follow-up audits is determined depending on the non-conformity categories by considering the number of corrective actions and in a manner that it does not exceed the initial certification audit period.

The duration of scope and address change audits is determined in accordance with the decision on how these audits will be carried out (such as a surveillance audit).

The use of a translator during the audit may need to be added during the audit period.

4.3.6. Audits of Multi-Site Organizations

Proks shall obtain necessary information concerning the applicant organization to:

a) confirm that a single management system is deployed across the organization;
b) determine the scope of the management system being operated and the requested scope of certification and, if applicable, sub-scopes;
c) understand the legal and contractual arrangements for each site;
d) understand “what happens where” i.e. processes/activities provided at each site and identify the central function;
e) determine the degree of centralization of process/activities which are delivered to all sites (e.g. purchasing);
f) determine interfaces between the different sites;
g) determine which sites may be applicable for sampling (i.e. where very similar processes/activities are provided) and those that are not eligible;
h) take into consideration other relevant factors (see also IAF MD 4, IAF MD 5, IAF MD 11: IAF Mandatory Document for Application of ISO/IEC 17021 for Audits of Integrated Management Systems (IMS), ISO/IEC TS 17023);
i) determine the audit time for the organization;
j) determine the audit team(s)’ competence required; and identify the complexity and scale of the processes/activities (e.g. one or many) covered by the management system.

When multi-site sampling is taken for the audit of the customer's management system that covers the same activities at various sites, Proks implements a sampling program to ensure proper control of the management system.

Sampling numbers for multi-site organizations to be audited for initial certification, surveillance, or recertification are calculated in the following table:

Number of Sites (excluding head office) (1)	Number of Samples for Initial Audit (2)	Sample Number For Surveillance Audit* (3)	Sample Number For Re-Certification Audit (4)	Notes (5)
1-2	100% (all)	(all)	(all)	--
3-4	2	2	2	**
5-9	3	2	3	**
10-25	4-5	3	4	**
26-36	6	4	5	**
37-49	7	5	6	**
50-64	8	5	7	**
65-100	9-10	6	8	**
101-121	11	7	9	**
122-144	12	8	10	**
145-169	13	8	11	**
170-225	14-15	9	12	**
226-256	16	10	13	**
257-289	17	11	14	**
290-324	18	11	15	**

325-400	19-20	12	16	**
> 400	At least 21	At least 13	At least 17	**

*) If more than one Surveillance audit is carried out in a year, the number specified in column (3) is divided by the number of Surveillance audit and the samples are chosen up to the number obtained.
**) At least 25% of sample operations are randomly selected. The remainder are selected from among the sites that show the greatest degree of difference in quality for a given time period. The calculation method used for the table given above and other rules related to sample selection are prepared by drawing on IAF MD1 documents.

When the samples are selected, the following criteria are taken into consideration:

- The internal audits of the sites and the results of the management review or a previous audit,
- Complaints received and corrective/preventive actions carried out in relation to complaints,
- The size of the sites,
- Shift work and documentation,
- Complexity of the management system and processes managed on the sites.
- Changes that have occurred after the last certification audit,
- Information about the maturity of the management system and the organization,
- Legal conditions, language and culture differences,
- Geographical distribution of the sites.

The justifications of the exemplification implementation will be documented in the Application Review Form and/or Audit Program for each client organization.

The head office of the organization is absolutely included in the first certification audit. The choice of the other sites is made randomly by looking at the relation of the processes between the sites, at which sites the critical processes are, or the field with the greatest number of processes.

If not all the sites where the organization carries out operations that are the subject of certification are ready at the same time, it is learned as to which of the sites of the organization that are subject to certification are and planning is made according to these sites.

4.3.7. Determination of Audit Team

The following issues are points to be taken into consideration when the size and structure of the audit team are decided:

- ✓ The EA and NACE code of the organization to be audited,
- ✓ Audit aims, scope, criteria, and estimated duration,
- ✓ The situation of the audit being a combined/integrated audit,
- ✓ Independence of the audit team from the operation/organization for which the audit is taking place and conflict of interests,
- ✓ Certification conditions (including applicable legal, regulatory or contractual conditions),
- ✓ The language in which the audit is done and the social and cultural characteristics of what is to be audited.

In all audit types, when an audit team to be appointed is established, at least one Auditor from the audit team must be appointed in the EA and NACE codes for the area of operation of the organization. Where this is not achieved, the team will be assigned Technical Experts appointed in the EA and NACE codes relating to the area of operation of the organization.

If part of the audit takes place in the electronic environment or if the site to be audited is virtual, Proks ensures that such activities are carried out by qualified personnel.

The Lead Auditor, Auditor, or Technical Expert who has received training, or has had a conflict of interest within the last two (2) years at the organization to be audited can not be assigned for an audit at the related organization.

For follow-up audits, it is ensured that at least one person from the previous audit team is present in the audit team in cases

that can be applied when the audit team is being determined. If there is no appropriately assigned auditor when the field expertise is required according to the situation of nonconformity, the technical expert is added to the audit team.

4.3.8. Creation of the Audit Plan

The Audit Plan is created by the appointed Lead Auditor so as to ensure that Auditors and Technical Experts on the audit team audit the products/services/processes or standard clauses related to their areas of expertise.

The audit plan is created in accordance with the scope and aims of the audit and includes at least the following:

a) Aims of audit,

b) Audit criteria,

c) Audit scope, including the definition of institutional and functional units and processes to be audited,

d) The dates and sites where auditing operations on the site will take place (including audit operations on different sites and away if appropriate),

e) The expected duration of auditing activities on the site,

f) Duties and responsibilities of members of the audit team and accompanying staff (e.g. observers and interpreters).

When the Audit Plan is created, the aims of the audit are determined, the scope of the audit and the criteria, including any changes, are negotiated with the customer organization and the following are considered:

- The aims of the audit describe what the audit to be done is and include the following:

a) The indication of the conformity of the customer's management system or a part of it using the audit criteria,

b) The indication that it is certain that the customer meets applicable, legal and regulatory requirements with the ability of their management system,

c) The indication of the efficiency of the management system for it to guarantee the expectation of the customer that the determined aims will be met,

d) Where appropriate, the description of potential improvement areas of the management system.

- The scope of the audit defines the boundaries of the audit (e.g., sites, management units, activities and processes to be audited). If the initial or recertification process consists of multiple audits (for example, if they involve different sites), then the scope of each audit may not include the full scope of certification, but it is ensured that the total of all the audits is consistent with the scope in the certification documentation.

The audit criteria is used as a reference to what the appropriateness is assigned to and includes the following:

- The conditions of the defined document that take effect related to the management systems,
- Defined processes and documentation of the management system developed by the customer.

The Audit Plan is designed in such a way that it takes each Auditor performing a minimum of 8 hours of audit per day independently as a basis. When obligatory, the audit period can extend by at most 2 hours for 1 day. Candidate auditors are not included in the audit/day period.

While the Audit Plan is being created, the break given for meals and travel time spent between sites of the organization will not be included in the audit period.

4.3.9. Informing the Organisations and the Audit Team before the Audit

Prior to audits, an Audit Plan where the names of Auditors and the Technical Experts who will served in the audit team are included as specified under the headings above is forwarded to the organization for which the audit is to take place. In this way, audit dates are agreed in advance with the customer organization.

Proks also provides the past information necessary for the members of the audit team, if requested, before the period so much that it is sufficient for objections to the customer related to the assigning of any Auditor (Lead Auditor, Auditor, External Auditor) or Technical Expert and, in cases of a valid objection, for the reorganization of the team. If, for a reasonable reason, the organization requests changes to the members of the audit team, the Operation Manager is required to provide written reasons. This applies to all audit types.

Examples of reasonable grounds include cases of conflict of interest (such as an audit team member being a former employee of the organization or advising the organization) or previous non-ethical behavior.

When information indicating that they have confirmed the audit is received from the organizations, the members of the audit team assigned by the Operation Manager are informed with the sending of the Audit Team Information Form.

The Operation Manager and the Lead Auditor coordinate and jointly conduct activities such as informing the audit team and providing access to the organization, accommodation, and carrying other organization.

4.4. Execution of Audit

Implementation and reporting of audits are carried out according to Audit Procedure.

4.5. Review and Certification Decision

The report prepared by the audit team is not final, but is of the opinion of the Certification Committee.

Proks carries out a review of the following before giving one of the decisions for issuing the certificate, extending or narrowing the scope of the certification, renewing, suspending, withdrawing, or canceling the certificate:

a) The adequacy of the information provided by the audit team in terms of certification conditions and certification scope,

b) The review, acceptance, and verification of any correction or corrective action for any major nonconformity,

c) The review an acceptance of any definitions of corrections or corrective actions for any minor nonconformity,

After the audit, there is no recommendation to the Certification Committee for a decision on certification or recertification without ensuring that the major nonconformities detected have been completely eliminated.

Verification that minor nonconformities are closed is done in the following audit at the latest.

After major nonconformities have been completely closed and, the definition of corrective action of minor nonconformities has been confirmed;

- Stage 1 Audit Report
- -If the audit is at the site- Stage 1 Audit Plan
- -If the audit is at the site- Stage 1 Opening/Closing Meeting Form
- -If available - Audit Findings Form
- -If available - Nonconformity Forms
- Audit Report
- Stage 2 Audit Plan
- Stage 2 Opening/Closing Meeting Form
- -If available- Records related to corrections/corrective actions

are presented to the Certification Committee.

The Operations Manager will provide the Certification Committee with the records necessary for decision.

It is essential that the persons and committee members who take the decisions are not the ones who perform the audits.

The persons and committee members who take the decisions confirm the following, before taking a decision:

a) The adequacy of the information provided by the audit team in terms of certification conditions and certification scope,

b) For all nonconformities showing the following, the audit team has reviewed, agreed, and verified corrections and corrective actions:

1) One or more conditions of the management system standard cannot be fulfilled,

2) Situations in which the customer has significant suspicions about their ability to reach the targeted output of the management system.

c) For other nonconformities, the customer has observed and accepted the planned corrections and corrective actions.

The Review and Decision Form for the decision will be prepared by the Operations Manager.

The Certification Committee makes a decision in the direction of the certification or recertification of the related organization as a result of the review and evaluation carried out in the file of the related organization with the Review and Decision Form.

The Review and Decision Form is signed by the Certification Committee only after the positive decision of the committee. After the non-positive decision of the Certification Committee, the Review and Decision Form is not signed.

The Certification Committee makes the certification decision based on the evaluation of audit findings, results, and other relevant information (public information, comments on the client's audit report).

In cases where competence is required other than the competence of the committee members, the relevant competent Lead Auditor / Auditor / Technical Expert is invited to the Certification Committee.

The Certification Committee makes decisions on recertification based on the results of recertification audits, systematic review during the certification period, and complaints from certified organizations.

As a result of the review and evaluation carried out at the Certification Committee, the Lead Auditor may be requested to prepare the report in cases where detailed information is required. In these cases, the decision of the organization is left for later. The Certification Manager communicates with the Lead Auditor and ensures that the necessary information is available.

4.6. Issuing of Certificate

The Review and Decision Forms signed by the Certification Committee and the Certification Manager are forwarded to the Operation Manager for the purpose of issuing the certificates.

The certificate issued includes the following information:

a) The name and geographical location of the customer whose management system is certified (or the geographic location of the central office and the sites covered in multi-site certification)

b) The "Initial Approval Date" of the certificate,

c) The "End Date" consistent with the recertification cycle,

d) The “Signature Date” of the certificate,

e) Identification code (Certificate No.),

f) The standard used in the audit of the certified customer and/or document that take effect, publication and/or revision number,

g) Where applicable, the scope of certification related with the product (including service), process, etc.

h) The name, address and logo of the Proks, other logos (e.g. the symbol of accreditation),

i) The standard used for certification or other information envisioned by the document that take effect,

j) Printing or revision of the certification document by distinguishing the revised documents from the previous

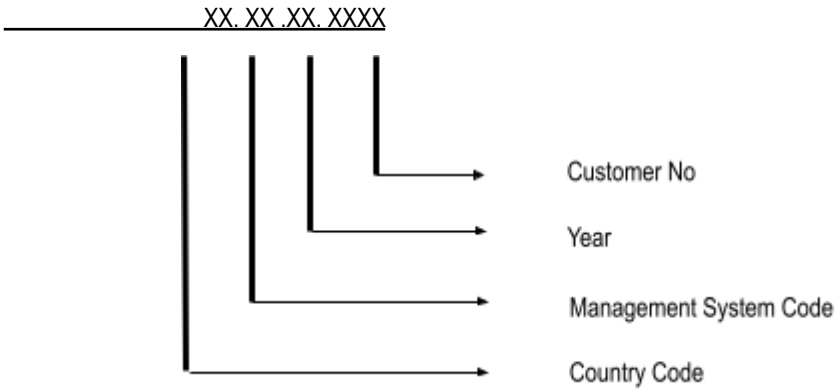
documents.

In the certificates of multi-site organizations, the addresses of all the sites deemed suitable for certification -in required circumstances- may be indicated on the certificate or on its annex.

If the organization has made a written request, Proks may prepare a certificate for each site and submit it to the organization.

Original certificates will be published in the "German" language. If it is required to be printed in another language, the information "this certificate is the translation of the original" will be written at the bottom of the certificate.

The method to be applied for the encoding of certificates is as follows:



Management System Code

QM	Quality Management System
IS	Information Security Management System

Country Code (International Vehicle Registration Code)

DE	Germany
TR	Turkey
AZ	Azerbaijan
NL	Netherland
UK	England

The certificates issued shall be signed by the Managing Director or the Certification Manager. Photocopies are taken to stay at Proks and attached to the relevant organization's file.

In certifications, the date of certification decision is written as "Initial Certification Date". The end date of the certificate is written in the "Certification Expiry Date" section. The validity and expiration of the certificate are based on the "Initial Certification Date".

The certificate of the organization is sent by cargo or delivered against a signature, after the arranged invoice is paid by the organization.

If the customer does not want a printed certificate, the certificate is sent by e-mail in pdf format by taking security measures.

Certified organizations are registered by the Operation Manager in the "Certified Organizations Database" in Google.

Certification Procedure

4.7. Maintaining of Certification

Proks decides to maintain the certification on the basis that it demonstrates that the customer organization has maintained the conditions of the management system standard. With the condition of the following, Proks decides on the continuing of the certification of the customer organization based on the Lead Auditor's positive recommendation decision without additional independent review and decision:

a) In any major nonconformity or situation that could cause the suspension or withdrawal of certification, the Lead Auditor reporting to Proks of the need to initiate an review by qualified personnel different to those who carried out the audit to determine that Proks decides to maintain the certification,

b) Adequate staff to monitor Proks' review activities to confirm that the certification activities are carried out effectively.

For organizations where the Certification Manager is the Lead Auditor/auditor in the implementation of the maintenance of certification, the signature is given by the Managing Director for demonstration of the responsibility of Proks to retain the authority for the decisions.

After the review made by the Certification Manager or the Managing Director, the Review and Decision Form is prepared, signed, and forwarded to the Operation Manager for the issuance of the certificates for the surveillance, scope or address change audits and title change requests deemed suitable.

In case of the determination of nonconformities that may lead to the suspension or withdrawal of the certification, the Lead Auditor may request that the relevant audit report and annexes be handled by the Certification Committee to determine whether or not the certification will be continued.

Revision History		
Rev. No.	**Revision Date**	**Revision Content**
00	--	First Release.
01	19.11.2018	Clause 4.3.2 updated.
02	21.12.2020	Clause 4.1.1, 4.1.2, 4.3.6, 4.5, 4.6 updated.
03	14.08.2023	Reviews and corrections made
04	29.03.2024	Reviews and corrections made
05	08.05.2024	Reviews and corrections made, ISO 14001 removed from the scope
06	27.01.2025	Updated for ISO/IEC 27006-1:2024 transition.

Prepared by	**Approved by**
Management Representative	Managing Director